

COMBINED DECLARATION AND POWER OF ATTORNEY

As the below named inventor, I hereby declare that:

1. Type of Application

This declaration is of the following type:

- ☐ original
- ☐ divisional
- ☒ continuation
- ☐ continuation in part

2. Inventorship Identification

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR INTERCHANGING PROMOTIONS ON A HAT

3. Specification Identification

The specification of which:

- ☒ is attached hereto
- ☐ was filed on _____ under Serial No. _____, executed on even date herewith;
- ☐ was described and claimed in PCT International Application No. _____ filed on _____

4. Priority Claim (35 U.S.C. § 119/120)

I hereby claim the benefit under Title 35, United States Code, § 119/120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112. I acknowledge the duty to disclose information that is material to the examination of this application, namely, information where there is substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, which occurred between the filing date of the prior application(s) and the national

or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC 119/120:					
U.S. APPLICATIONS			STATUS (check one)		
U.S. APPLICATIONS	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
60/440,139	January 15, 2003		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NUMBER	PCT FILING DATE	U.S. SERIAL NOS. ASSIGNED (if any)			
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Acknowledgment of Review of Papers and Duty of Candor

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, and which is material to the examination of this application; namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent.

6. **Power of Attorney**

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Wendy K. B. Buskop
Christian N. Heausler

Reg. No. 32,202
Reg. No. 50,771

SEND CORRESPONDENCE TO:

Wendy K. B. Buskop
BUSKOP LAW GROUP PC
1717 St. James Place, Suite 500
Houston, Texas 77056

DIRECT TELEPHONE CALLS TO:


Wendy K. B. Buskop
(713) 403-7411

7. **Declaration**

I hereby declare that all statements made herein of my our knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full names of inventor:

1. ~~RUSSELL~~ EARL MORRIS


Inventor's signature


Date

Residence: 650 Crescent Blvd., Southwest
Calgary, Alberta T2S 1L2
Canada

Post Office Address: 650 Crescent Blvd., Southwest
Calgary, Alberta T2S 1L2
Canada

Country of Citizenship: US